								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								10/723,792						
CLAIMS AS FILED - PART I								MALL	EN.	TITY		OTHER	THAN	
_		<u></u>	(Column	nn 1) (Column 2)				TYPE		OR				
TOTAL CLAIMS 15								RATE FEE		FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		E	BASIC FEE 3		385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			15 minus 20=		* Ø			X\$ 9=			OR	X\$18=		
INDEPENDENT CLAIMS			2_ minus 3 =		* 1			X43=			OR	X86=		
ML	JLTIPLE DEPEN	NDENT CLAIM P	RESENT				l	+145=			OR	+290=		
* If	the difference	in column 1 is	less than zero, enter "0" in column 2			column 2	L		\dashv	-	. I		<u> </u>	
								TOTAL	L		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	L EI	YTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER		HIGH NUME PREVICE	EST BER OUSLY	PRESENT EXTRA		RATE		ADDI- IONAL		RATE	ADDI- TIONAL	
	Total	*	Minus	PAID I	FOR	=	r	X\$ 9=	+	FEE	OR	X\$18=	FEE_	
	Independent	*	Minus	***		=	\vdash	X43=	\dagger			X86=	,	
₹	FIRST PRESE	NTATION OF M	JLTIPLE DEI	PENDENT	CLAIM		\vdash	740=	+		OR	7.00-	,	
	16,							+145=		:	OR	+290=		
								TOTA DDIT. FE			OR	TOTAL ADDIT. FEE		
		(Column 3)					_							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID I	BER OUSLY	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***		=		X43=	1		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\dagger					
	+145= TOTAL										OR	+290=		
								DIT. FE			OR	TOTAL ADDIT. FEE		
														
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
Σ	Total	*	Minus	**		=		X\$ 9=			OR	X\$18=		
ME	Independent	*	Minus	***		=		X43=	\dagger			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								╀		OR	7.00-		
	, , , , , , , , , , , , , , , , , , ,					,	L	÷145=			OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR ,	TOTAL ADDIT, FEE			
		mber Previously Pa ber Previously Pai								priate box				